CAMPAIGN CONTRIBUTIONS AND E	XPENSES REPORT		itate of Nevada
BOB COFFIN	STATESENA	TE	10_
Name (print)	Office (if applicable) LAS VEHAS NEVAN		istrict (if applicable)
Mailing Address (include city and zip code)	LAS VELAS NEVAL	Telephone No.	2304430
BCOFFIN @ SEN	. STATE NV. US		
E-Mail Address	CIDAC CIDAC CIDOL DOTY CIBIO	EXP NONPROFI	T.COPP 1
Select Appropriate Bex(es) CANDIDATE	□PAC □BAG □POLPRTY □INO	EXP [] MONEROFI	i core
☐ AMENDED	ANNUAL FILING TPETITIONERS WHO IT OR EXPEND FUNDS		ETITION & RECEIVE
Annual Filing - Due January 15			
Period: January 1, 2005 – December 31,	2005		
Report #1 — Due August 8, 2006 Period: Jan. 1, 2006 — Aug 3, 2006	6 *		
Report #2 Due — October 31, 20 Period: Aug. 4, 2006 — Oct. 26, 2006			1
Report #3 Due — January 15, 20		-	
Period: Oct. 27, 2006 — Dec. 31, 200			
Annual Filing - Due January 15.	. 2007	FOR OF	FICE USE ONLY
Period: January 1, 2006 - Decem			
* These Reports are filed by incumbe	ents/candidates running for office in ti	ne 2006 election cy	cle
** Third Report suffices for 2007 Ann	ual Filing if candidate also filed Repor	t Nos. 1 and 2	Cumulative
CONTRIBUTIONS SUM	MARY		From Beginning of Report Period #1
		This Period	through End of This Reporting
÷ .			Period
1. Total Monetary Contributions Received in E (See page 1 of Instruction sheet)	xcess of \$100	28750	Ì
2. Total Monetary Contributions Received of \$	100 or Less		
(See page 2 of instruction sheet)			
 Total Monetary Contributions in the form of party. (See page 2 of instruction sheet) 	idans guaranteed by a mird	-	
4. Total Monetary Contributions in the form of	loans that were forgiven		
(See page 2 of instruction sheet)	Cumulative Fram		
	This Period Seginning of Report Period \$1		
	Through End of This Reporting	•	
5. Total Amount of Monetary Contribution:	Period		t
Received	_	28750	·
(Add Lines 1 through 4) (See page 2 of instru 6. Total Amount of Written Commitments for	ction sheet)	20/30	
Contributions (When commitment is funded, report contribution (monetary or in kind))	tas		
(See page 2 of Instruction sheet) 7. Total Value of In Kind Contributions Received	7000 l	_	
Excess of \$100 (See page 2 of Instruction		_	
		. : .	i .
	EXPENSES SUMMARY	, .	
Total Monetary Expenses Paid in Excess ((See page 2 of Instruction sheet)	¥\$100	14544	
9. Total Monetary Expenses Paid of \$100 or L	855	7579	
(8ee page 2 of instruction sheet) 10. Yotal Amount of All Monetary Expenses	Daid	124	
(Add Lines 8 and 9) (See page 2 of ins	truction sheet)	14668	
11. Total Value of in Kind Expenses in Excess of \$100 (See page 3 of instruction shee			
12. Disposition of Unspent Contributions			
(Only reported on Report #3 , Annual Report day of the second month after candidates d			
incumbent does not run for reelection)	14082		
(See page 3 of instruction sheet)	(American advisor	<u> </u>	
I Declary Upder Penalty of Begury Th	AFFIRMATION at the Foregoing is True and Correct.		
11/1/1/01		1.11	
- (SON STALL	(fre	1 14/06	
Signature	~ · /	Date	6
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eport	Peri	od	#/	4

Name (print)

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	GHECK HERE IF LOAN	NAME AND ADDRESS OF 3 ⁵⁰ PARTY IF LOAN GUARANTEED BY 3 ⁵⁰ PARTY	MARE AND ADDRESS OF PERSON WID PORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
NV SUBCONTRACTO 3644 MEADE LOSVEGAS	1/105	1000			
COAST HOTELS. 4500 W. TRUPICAMA LASVELAS WV	10/06/05	5000			
COAST CASINOS	10/06/05	5000			
MICHAELGAVGHA SAME AS ABOVE		5000			
HSBC NAMERON POX 2700 SANDERS RA BROSPECT HGT IL	11/28/05	750			
ALTRIA CORP. SUC. 120 PARK AVE NEW YORK AY	11/28/05	1000			
BANK AMERICA PAC 600 PERCHTRUE ATLANTA GA	11/28/05	1000			
Kummer KARAPFER 3800 HOWARD HYPA LASVEGAS NV	. /	1500			
ACME ENTERPRISE 3800 HOWMAHUM LAS VEGAS NV	12/05/05	1500			
S.H. LIN COLA BAG 3800 HOWARD HUGHES LASVIGAS AV	12/05/05	1500			
RAS Investment 9-19 CAMELIA DR- HENDIASON NJ	12/05/65	2000			
Station CASINOSCORP. P.O. 3° x 24525 LAS VERIAS NO	12/31/05	1000			
BARRICK GOLD 136 E TEMPLE SALTLAKECITY UT SMAXYDAC 3800 HOWADHUNG LASTELKS NU	12/31/05	1000			
3800 HOW Apolly	x 12/05/ps	1500			

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ATE SENATE

Name (print)

Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT
NEMPAC 2590 RUSSELL Rd LKS KEGAS NV	Dec. 23, 2005	1,000

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BOB COFFIN

Name (print) Office (if applic

Office (if applicable)

District (if applicable)

Expense Categories

	T
CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	н
** Goods and services provided in kind for which money would otherwise have been paid	l
Other miscellaneous expenses	J

** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

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BOB COFFIN Name (print)

STATE SEWATE Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A 365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
PREMIER GOLLER (Lub LAS VEGAS NV	ナ	2/2	525
SPRINT PCS LAS VEGAS NV	A	2/15 3/15 11/3	130 500 337
	·	12/12	170 957
CLARK CO. Democratus PARTY LOSVIGAS, NV	Н	10/9	200
High School	H	10/9	375
HELP OF SOUTHIPN LAS VEYAS NV	4	10/23	180
LAS VEGAS NU	J	10/25	1000
REBEL GOLF FOUNDATION LASVEGAS NV	H	11/2	300
BISHOP GORMAN DEVELOPMENT FUND LASVELAS NV US POSTAL SERVICE	T	11/2	1000
LAS Vegas NV	A	11/5	396
BOB COFFIN 1139 54 PL. LAS VENAS NY	A	11/5	500
BOB COFFID PL. 1139 5 th PL. Los Vegas NV	A	11/5	500

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1200	(0	FFIN
Name (print)		

Expenses in Excess of \$100
Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

CATEGORY (See Previous Page) NRS 294A:365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
H	12/8	3620
A	12/12	299
ナ	12/12	394
F	12/16	2000
A	12/16	261
J	12/31	1000
	(See Previous Page) NRS 294A.365 H A F A	(See Previous Page) NRS 294A.385 H 12/8 12/12 12/12 12/16 A 12/16

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